Approved for use though 10 10000 CMB ON1 -0032 Under the Papermont Baduction Act of 1995, no periods are required to respond to a sollection of Information unless & displays a valid CMB control surnber U.S. Poleni and Trademark Office; U.S. DEPARTMENT OF COMMERCE PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-876. Effective December 8. 2004 01575 862 APPLICATION AS FILED - PARTI OTHER THAN (Column 1) SMALL ENTITY (Coinin 2) OR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA RATE (\$) BASIC FEE FEE (1) RATE (\$1 FÉL(1) HVA (37 CFR 1 16(4) (6) # (6)) HIA 150.00 NIA 300.00 SEARCHFEE N/A (37 CFR 1 16(N. 14, oc 14) NIA N/A \$250 HIA \$600 **EXAMINATION FEE** : NA (37 CFR 1 1610). (p), or (a)) N/A NA \$100 NA \$200 TOTAL CLAIMS 137.CFR 1 16(1) X\$ 25 MUNUT 20 . X\$50 INDEPENDENT CLAIMS OR 137 CFR 1 16(h)) X100 C eurim X200 Of became agricultural not sold to APPLICATION SIZE sheets of paper, the application size fee due is \$260 (\$125 for small entity) for each 137 CFR 1 16(4) additional 60 sheets or fraction thereof, see 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s) MULTIPLE DEPENDENT CLAIM PRESENT DT CFR I 1601 +180= 4360= • If the difference in column 1 is less than 2 ero, and at "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II. (Column 1) (Column 2) (Column 3): OTHER THAN OR SMALL ENTITY CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT RATE (1) ADDI-UN. RATE(\$) AFTER PREVIOUSLY ADDI: IAHOIT MENDMENT PAID FOR TIONAL FEE (1) ALCIA LINE Minus FEE (1) ENDM X\$ 25 X\$50 hdependent professionu OR Minus. X100 X200 2000 OR. Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (127 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE ONE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADDI-RATE (\$) AFTER. MENOMENT PREVIOUSLY EXTRA ADOI-TIONAL TIONAL FEE (1) PAID FOR FEE-(4) Total: Minus **MOND** X\$ 25 X\$50 OR tridipendent Minue X100 X200 OR Application \$120 F40 (37 CFR 1.16(8)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.160) +180= +360a OR TOTAL! TOTAL . If the entry in column 1 is best than the entry in column 2, write "o' in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the spacephale box in column 1.

It collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is potented by 35 U.S.O. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Unding gathering, preparing, and cubmitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any commental the amount of time you require to complete this form and/or suggestions for reducing this burden, should be earl to the Crite Information Officer, U.S. Petern 1 trademusk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ORBESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. OR.